House File 446 - Introduced

HOUSE FILE 446
BY BROWN-POWERS

A BILL FOR

- 1 An Act relating to substance use disorder treatment and
- 2 behavioral health services and reimbursement, and including
- 3 effective date provisions.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Τ	DIVISION 1
2	INTEGRATED PROVIDER NETWORK PROVIDERS — REIMBURSEMENT
3	Section 1. INTEGRATED PROVIDER NETWORK PROVIDERS -
4	MEDICAID PROVIDERS — REIMBURSEMENT. The department of
5	human services shall establish an integrated provider network
6	provider as a participating provider type under the Medicaid
7	program consistent with the community mental health system
8	provider type. The department shall reimburse the integrated
9	network provider type consistent with the Medicaid community
LO	mental health center enhanced fee schedule beginning January
L1	1, 2022.
L 2	Sec. 2. EMERGENCY RULES. The department may adopt emergency
L 3	rules under section 17A.4, subsection 3, and section 17A.5,
L 4	subsection 2, paragraph "b", to administer the provisions of
L 5	this division. Any rules adopted in accordance with this
L 6	section shall also be published as a notice of intended action
L7	as provided in section 17A.4.
L8	Sec. 3. EFFECTIVE DATE. This division of this Act, being
L9	deemed of immediate importance, takes effect upon enactment.
20	DIVISION II
21	SUBSTANCE USE DISORDER TREATMENT SERVICES AND BEHAVIORAL HEALTH
22	SERVICES PROVIDERS — REIMBURSEMENTS
23	Sec. 4. SUBSTANCE USE DISORDER TREATMENT SERVICES AND
24	BEHAVIORAL HEALTH SERVICES PROVIDERS — REIMBURSEMENTS.
25	1. The department of public health in collaboration
	with the department of human services shall review and make
	recommendations for Medicaid 1915(b)(3) waiver reimbursement
	rates for substance use disorder intensive outpatient and
	residential treatment services using a projected cost report
	agreed upon by the departments and the integrated provider
	network providers. The departments shall establish time frames
	for release of the agreed-upon projected cost report form to
	providers and the deadline for submission of the completed
	projected cost reports by providers to the departments, in
≀ ⊑	order to allow sufficient time for region and the making of

- 1 recommended adjustments to the Medicaid 1915(b)(3) waiver
- 2 reimbursement rates for Medicaid integrated provider network
- 3 providers beginning July 1, 2022.
- 4 2. The department of public health in collaboration with
- 5 the department of human services and behavioral health services
- 6 providers shall review reimbursement rates for behavioral
- 7 health services and Medicaid 1915(b)(3) waiver services using
- 8 the projected cost report agreed upon by the departments and
- 9 the integrated provider network providers. The departments
- 10 shall establish time frames for release of the agreed-upon
- 11 projected cost report form to behavioral health services
- 12 providers and the deadline for submission of the completed
- 13 projected cost reports by behavioral health services providers
- 14 to the departments, in order to allow sufficient time for the
- 15 departments to review and make recommended adjustments to
- 16 the Medicaid 1915(b)(3) waiver reimbursement rates and the
- 17 behavioral health services fee schedule beginning July 1, 2022.
- 18 3. The department of public health, in collaboration with
- 19 the department of human services, shall establish an ongoing
- 20 plan for regular review of reimbursements for providers of
- 21 substance use disorder treatment services and behavioral health
- 22 services and provide information to the governor and the
- 23 general assembly in a timely manner to allow for the provision
- 24 of appropriate funding for any change in reimbursements.
- 25 Sec. 5. EMERGENCY RULES. The department may adopt emergency
- 26 rules under section 17A.4, subsection 3, and section 17A.5,
- 27 subsection 2, paragraph "b", to administer the provisions of
- 28 this division. Any rules adopted in accordance with this
- 29 section shall also be published as a notice of intended action
- 30 as provided in section 17A.4.
- 31 Sec. 6. EFFECTIVE DATE. This division of this Act, being
- 32 deemed of immediate importance, takes effect upon enactment.
- 33 DIVISION III
- 34 MEDICATION-ASSISTED TREATMENT
- 35 Sec. 7. MEDICATION-ASSISTED TREATMENT PRIOR

- 1 AUTHORIZATION PROHIBITED. The department of human services
- 2 shall adopt rules pursuant to chapter 17A that prohibit prior
- 3 authorization for medication-assisted treatment under both
- 4 Medicaid fee-for-service or managed care administration.
- 5 The department of human services shall also include this
- 6 prohibition in any contract entered into with a Medicaid
- 7 managed care organization. For the purposes of this
- 8 section, "medication-assisted treatment" means the medically
- 9 monitored use of certain substance use disorder medications in
- 10 combination with other treatment services.
- 11 Sec. 8. EMERGENCY RULES. The department may adopt emergency
- 12 rules under section 17A.4, subsection 3, and section 17A.5,
- 13 subsection 2, paragraph "b", to administer the provisions of
- 14 this division. Any rules adopted in accordance with this
- 15 section shall also be published as a notice of intended action
- 16 as provided in section 17A.4.
- 17 Sec. 9. EFFECTIVE DATE. This division of this Act, being
- 18 deemed of immediate importance, takes effect upon enactment.
- 19 DIVISION IV
- 20 SUBSTANCE USE DISORDER ADVISORY PANEL
- 21 Sec. 10. SUBSTANCE USE DISORDER ADVISORY PANEL. The
- 22 department of public health in collaboration with the
- 23 department of human services shall establish a substance use
- 24 disorder advisory panel to review access to substance use
- 25 disorder services and to resolve barriers to access. The
- 26 members of the advisory panel shall include but are not
- 27 limited to representatives of hospital-affiliated substance use
- 28 disorder treatment programs, the integrated provider network,
- 29 and others with interest or expertise in substance use disorder
- 30 treatment services and reimbursement.
- 31 DIVISION V
- 32 MEDICAID WAIVER OPPORTUNITIES
- 33 Sec. 11. MEDICAID WAIVER OPPORTUNITIES. The department of
- 34 human services in collaboration with the department of public
- 35 health shall review opportunities including application for

- 1 the federal Medicaid 1115 demonstration waiver or amendments
- 2 to the existing federal Medicaid 1915(b) waiver to enhance
- 3 access to and reimbursement for substance use disorder
- 4 treatment services. The departments shall report findings and
- 5 recommendations to the governor and the general assembly by
- 6 October 1, 2021.
- 7 EXPLANATION
- 8 The inclusion of this explanation does not constitute agreement with 9 the explanation's substance by the members of the general assembly.
- 10 This bill relates to reimbursement rates for providers of
- 11 substance use disorder treatment services and behavioral health
- 12 services.
- Division I of the bill requires the department of human
- 14 services (DHS) to establish an integrated provider network
- 15 provider as a participating provider type under the Medicaid
- 16 program consistent with the community mental health system
- 17 provider type. The division requires DHS to reimburse
- 18 the integrated network provider type consistent with the
- 19 Medicaid community mental health center enhanced fee schedule
- 20 beginning January 1, 2022. The division provides for emergency
- 21 rulemaking and takes effect upon enactment.
- 22 Division II of the bill relates to reimbursement rates
- 23 for providers of substance use disorder treatment services
- 24 and behavioral health services. The division requires the
- 25 department of public health (DPH), in collaboration with DHS,
- 26 to review and make recommendations for Medicaid 1915(b)(3)
- 27 waiver reimbursement rates for substance use disorder intensive
- 28 outpatient and residential treatment services using a projected
- 29 cost report agreed upon by the departments and the integrated
- 30 provider network providers. The departments are required
- 31 to establish time frames for release of the agreed-upon
- 32 projected cost report form to providers and the deadline for
- 33 submission of the completed projected cost reports by providers
- 34 to the departments, to allow sufficient time for review and
- 35 adjustments to reimbursement rates for Medicaid integrated

- 1 provider network service providers beginning July 1, 2022. 2 The division also requires DPH, in collaboration with DHS and 3 behavioral health services providers, to review reimbursement 4 rates for behavioral health services and Medicaid 1915(b)(3) 5 waiver services using the projected cost report agreed 6 upon. Again, the departments shall establish time frames and 7 deadlines for the cost reports to allow sufficient time for 8 the departments to review and make recommended adjustments to 9 the reimbursement rates and the behavioral health services fee 10 schedule beginning July 1, 2022. The division directs DPH 11 in collaboration with DHS to establish an ongoing plan for 12 regular review of reimbursements for providers of substance 13 use disorder treatment services and behavioral health services 14 and to provide information to the governor and the general 15 assembly in a timely manner to allow for the provision of 16 appropriate funding for any change in reimbursements. 17 division provides for emergency rulemaking and takes effect 18 upon enactment. 19 Division III of the bill requires DHS to adopt 20 administrative rules to prohibit prior authorization for 21 the provision of medication-assisted treatment under either 22 Medicaid fee-for-service or managed care administration. 23 The division also requires DHS to include this prohibition 24 in any contract entered into with a Medicaid managed care 25 organization. Under the division, "medication-assisted 26 treatment" means the medically monitored use of certain
- 30 Division IV of the bill requires DPH in collaboration

29 rulemaking and takes effect upon enactment.

28 treatment services. The division provides for emergency

31 with DHS to establish an advisory panel to review access to

27 substance use disorder medications in combination with other

- 32 substance use disorder services and to resolve barriers to
- 33 access. The members of the advisory panel include but are not
- 34 limited to representatives of hospital-affiliated substance use
- 35 disorder treatment programs, the integrated provider network,

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- 1 and others with interest or expertise in substance use disorder
- 2 treatment services and reimbursement.
- 3 Division V of the bill directs DHS in collaboration with
- 4 DPH to review opportunities including application for a
- 5 federal Medicaid 1115 demonstration waiver or amendments
- 6 to the existing federal Medicaid 1915(b) waiver to enhance
- 7 access to and reimbursement for substance use disorder
- 8 treatment services. The departments shall report findings and
- 9 recommendations to the governor and the general assembly by
- 10 October 1, 2021.